Bronx Community Health Dashboard: *Breast Cancer*

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See last [slide](#) for more information about this project.

While breast cancer can occur among men, it is very rare. This dashboard focuses on breast cancer among women.
Among women, breast cancer is the 2nd leading cause of disability among cancers in the US.

Disability-Adjusted Life Years (DALYs) are calculated by adding the Years of Life Lost due to premature mortality in the population and the Years Lost due to Disability for people living with the health condition or its consequences.

Diabetes mellitus, asthma, and depressive disorders are included for comparison.

Breast cancer incidence
Breast cancer rates have increased in the Bronx and New York City overall

In the Bronx, the breast cancer incidence rate is highest among 70-74 year olds

In the Bronx, the rate of new breast cancer diagnoses is highest among non-Hispanic white women.

In the Bronx, breast cancer rates remain highest among non-Hispanic white women.

Rates are age-adjusted to the 2000 US Std million (19 age groups) standard.
The incidence of breast cancer is about as expected in most of the Bronx, with incidence rates less than expected in certain neighborhoods.

Data source: NY State Cancer Registry, 2010-2014

Data is presented at the Neighborhood Tabulation Area (NTA)-level and is age-adjusted.
Mortality from breast cancer
While the incidence of breast cancer has increased since 1976, breast cancer mortality has declined.
In the Bronx, the mortality rate from breast cancer is highest among 85+ year olds.

In the Bronx, the mortality rate from breast cancer is highest among non-Hispanic white and black women.

Age-adjusted mortality rate from breast cancer per 100,000:
- Hispanic: 15.9
- Non-Hispanic black: 28.5
- Non-Hispanic white: 30.8

In the Bronx, mortality rates from breast cancer have decreased among all race/ethnicity groups.

![Graph showing age-adjusted mortality rates from breast cancer per 100,000 for Non-Hispanic white, Non-Hispanic black, and Hispanic populations from 1992-2016.](image)

- **Non-Hispanic white**
  - 1997-2001: 40.0
  - 2002-2006: 38.0
  - 2007-2011: 30.8
  - 2012-2016: 28.5

- **Non-Hispanic black**
  - 1992-1996: 35.0
  - 1997-2001: 30.0
  - 2002-2006: 28.0
  - 2007-2011: 27.0
  - 2012-2016: 26.0

- **Hispanic**
  - 1992-1996: 19.8
  - 1997-2001: 19.5
  - 2002-2006: 17.0
  - 2007-2011: 16.0
  - 2012-2016: 15.9

Rates are age-adjusted to the 2000 US Std million (19 age groups) standard.
Risk factors & protective factors
Potential risk factors for which there is strong evidence of an association with breast cancer and data available for the Bronx

**Increases risk**
- Obesity or high BMI (among post-menopausal women only)
- Heavy alcohol consumption
- First pregnancy over the age of 30
- Greater birth weight

**Decreases risk**
- Exercising (particularly vigorous exercise)
- Breastfeeding

The prevalence of obesity among adults is highest in the Bronx and increasing at a higher rate than in other boroughs. Body Mass Index (BMI) is calculated based on respondents' self-reported weight and height. A BMI of 30 or greater is classified as obese.

The association between obesity and breast cancer depends on menopausal status; it is a risk factor among post-menopausal women only.


Body Mass Index (BMI) is calculated based on respondents’ self-reported weight and height.
The percent of adults who drink heavily is relatively stable in the Bronx.


Heavy drinking is defined as an average of more than 2 drinks per day for men and more than 1 drink per day for women.
The percent of adults who exercised in the past 30 days remains lowest in the Bronx, with minimal improvement.

Average age of first birth is substantially lower in the Bronx than the rest of NYC, but it is increasing.

Later age of first birth is associated with an increased risk of breast cancer, though not having any children is a stronger risk factor.

The percent of total births with high birth weight is relatively stable in the Bronx

High birth weight defined as > 4,500 g at any given gestational age.
The percent of women exclusively breastfeeding is lowest in the Bronx and relatively unchanged.
Potential risk factors for which there is strong evidence of an association with breast cancer, but no high-quality data is available for the Bronx

**Increases risk**

- Early menarche (before the age of 12)
- Late natural menopause (after the age of 55)
- Ionizing radiation exposure from medical imaging, particularly during puberty
- Hormone therapy (containing estrogen with or without progesterone)—the risk is greater with combined estrogen plus progesterone preparations
- Oral contraceptives containing both estrogen and progesterone cause a small increased risk in young women, among current and recent users only

**Decreases risk**

- Bearing children

About the Community Health Dashboard Project

- The goal of the project is to provide Bronx-specific data on risk factors and health outcomes with an emphasis on presenting data on trends, socio-demographic differences (e.g., by age, sex, race/ethnicity, etc.) and sub-county/neighborhood level data

- Data will be periodically updated as new data becomes available.

- Produced by Montefiore’s Office of Community & Population Health using publicly-available data sources

- For more information please contact us at OCPHDept@montefiore.org